



**Vermont Department of Labor
Regional Workforce Partnership
Grant Opportunity for FY'15**

General Information:

Act 199, passed into law in 2014, extended authorization for performance grants for regional workforce education and training activities.

The Commissioner of Labor, in consultation with the Secretary of the Agency of Commerce and Community Development and the State Workforce Investment Board, is authorized to issue grants to support workforce development activities in a region.

The Vermont Department of Labor is allocating approximately \$110,000 for these grants this FY'15 year. Interested applicants should not request more than \$10,000 each.

Eligible applicants include any organization or person(s) engaged in workforce development activities, provided that the entity is registered to do business in the State of Vermont and is in compliance with Vermont laws. Applicants that positively impact the skills and readiness of the local workforce, support the workforce needs of businesses, create jobs, and improve the economic opportunities for the local workforce, will receive preference in the review process.

Each application must specify the details of the workforce development activities for which you seek funding, the specific program(s) you will offer, and the geographic area, and/or any targeted population you will serve. These funds cannot be used for programs and activities already currently or scheduled to be funded through other sources, but can be used to extend or supplement those programs and activities. Performance measures including timelines, performance metrics, and outcomes must be included. You must describe how this information and data will verify the success of your program.

Proposals must be submitted electronically as a WORD document by 4:00 p.m. February 2, 2015 to Vermont Department of Labor staff members Sally Redpath sally.redpath@state.vt.us and Rhonda Hopkins rhonda.hopkins@state.vt.us. If you have questions please contact Sally Redpath at 802-828-4394. Grants will begin when grant documents have been signed by both parties.



Application for Vermont Department of Labor Regional Workforce Development Partners' Grant

Contact information:

- a) Contact Name -
- b) Applicant Organization -
- c) Mailing Address -
- d) Phone -
- e) Email -
- f) Organization website link
- g) FEIN -

Towns or Region to be served:

Note to applicants:

- Please use this document as your application, entering text directly.
- Eligible applicants include any organization or person(s) engaged in workforce development activities, provided that the entity is registered to do business in the State of Vermont and is in compliance with Vermont laws. Applicants that positively impact the skills and readiness of the local workforce, and improve the vitality of the local economic area, will receive preference in the review process.
- Be concise and specific in response to each question.
- Deadline for Applications: February 2, 2015.
- Please e-mail your application as a WORD document to sally.redpath@state.vt.us and rhonda.hopkins@state.vt.us

Address the following items. Be specific and clear. Please enter your responses directly on this form, immediately following each item, using a different font to distinguish the response. Mark N/A if an item does not apply.

Executive Summary: Provide an Executive Summary (up to two pages) that describes the structure and overall goals and objectives of the program.

Program Description: Describe your program in a descriptive narrative, including at least the following information:

1. The scope of the program, including partners involved, and individuals and entities to be served.
2. The work plan, including the activities that the grant money will support; and who will be served (individuals? employers? other?). Include a program timeline.
3. How the partners and other involved entities will cooperate and collaborate.
4. Specify how the activities will improve the targeted area's workforce development for businesses and individuals. Will your program address the needs of employment-challenged Vermonters, including, but not limited to, economically disadvantaged, people with disabilities, Veterans, underemployed and unemployed individuals, minority populations, at-risk youth, new Americans, older workers, long-term unemployed, etc.?

5. Describe how the program will serve local and regional employers. Include information about the workforce needs, skill shortages, and available workforce in the area to be served. Indicate the sources of this data and information.
6. Describe how the program will coordinate with and use the resources of educational and training entities in the area/region. Be specific.

Program Effectiveness and Outcomes: How will the effectiveness and outcomes of the program be measured? Be specific.

Cost Effectiveness: Indicate the sources and amounts of all other current and approved State and federal funding that the applicant receives and directly relates to the proposed project.

Past Accomplishments; Evidence of Experience and Capacity to Carry out the Work: Describe your measurable workforce development achievements over the past several years. Describe your capacity to carry out this work.

G) Budget and Budget Narrative: Complete attached Budget and Budget Narrative forms.

BUDGET INFORMATION

Print Grantee Name: _____

Grant Number: (TBD) _____

SECTION A – Budget Summary by Categories

1. Personnel	
2. Fringe Benefits (Rate %)	
3. Travel	
4. Supplies	
5. Contractual	
6. Other	
7. Total, Direct Cost (Lines 1 through 6)	
8. Indirect Cost (Rate %)	
9. TOTAL Funds Requested (Lines 7 through 8)	

BUDGET NARRATIVE INSTRUCTIONS

The Budget Narrative must describe the individual line item costs.

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|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 1. | <i>Personnel (employees of applicant)</i>
What positions
Hourly rate
of hours | \$ |
| 2. | <i>Fringe (for employees listed under personnel)</i>
Which benefits?
For which staff?
At what rate? | \$ |
| 3. | <i>Travel (for employees of applicant)</i>
of people
of miles
Reimbursement per mile
Other travel and per diem costs | \$ |
| 4. | <i>Supplies</i>
Include the cost of consumable supplies and materials to be used during the project period. | \$ |
| 5. | <i>Contractual</i>
If any money is subcontracted, describe how the money will be used. Any person or entity with whom the Grantee subcontracts for an amount totaling \$10,000 or more, for this project, must first be cleared for State and Federal labor and tax law compliance before the Grantee offers or engages in a subcontract. To receive clearance, submit the person's name, Social Security Number, business entity name, or DBA, and FEIN. The subcontract will need to be reviewed and approved by the VDOL. Subcontracts for amounts under \$10,000, while not requiring prior approval, must still comply with applicable Vermont laws. | \$ |
| 6. | <i>Other</i>
Indicate all direct costs not clearly covered by lines 1 through 5 above. Include, but not limited to, communications, postage, printing, advertising, staff training, fiscal agent, rent, utilities, telephone, etc. | \$ |
| 7. | <i>Total, Direct Cost</i>
No description required. | \$ |
| 8. | <i>Indirect Cost</i>

Indirect costs represent expenses of doing business that are not readily identifiable with a particular activity but are necessary for the general operation of the entity. Often, these are referred to as "overhead" and can include such things as accounting, payroll processing, purchasing, etc. To qualify for an indirect cost rate, the entity has to have its rate officially approved by its primary funding source, as outlined in the VT Agency of Administration's Bulletin 5-Policy for Grant Issuance and Monitoring. A copy of the approved Indirect Cost Agreement must be included with any grant that wishes to use an indirect cost rate. Otherwise these expenses may be direct charged. If an indirect cost rate is used, the budget will not be allowed to have any other charges that are deemed to be "overhead." | \$ |
| 9. | <i>TOTAL Funds Requested</i> | \$ |



Things to Know Before You Apply for a VDOL State Grant

1. **Entity must be registered to do business in the State of Vermont:** If not, then the applicant must contact the Secretary of State's Office at www.sec.state.vt.us or 802-828-2363/800-439-8683.
2. **Applicant will need to provide Entity's Federal Employer Identification Number.**
3. **Entity must be registered and in good standing with VDOL Unemployment Insurance Division; VDOL Workers' Compensation Division; VDOL VOSHA Division; and VDOL Wage and Hour Division.**
4. **Entity must be in good standing with the Vermont Department of Taxes.**
5. **Entity must not be debarred from doing business with the State and/or Federal Government.**
6. **Insurance:**

The following coverage is required:

Commercial General Liability and Property Damage: With respect to all operations performed under the grant, the grantee shall carry commercial general liability insurance having all major divisions of coverage including, but not limited to:

Premises - Operations
Independent Contractors' Protection
Products and Completed Operations
Personal Injury Liability
Contractual Liability
(These are the pieces of a normal Commercial General Liability (CGL) policy.)

The policy shall be on an occurrence basis and limits shall not be less than:

\$1,000,000 Per Occurrence
\$1,000,000 General Aggregate
\$1,000,000 Products / Completed Products Aggregate
\$ 50,000 Fire Legal Liability

Automotive Liability: The grantee shall carry automotive liability insurance covering all motor vehicles, including owned, non-owned, and hired, used in connection with the grant. Limits of coverage shall not be less than: \$1,000,000 combined single limit.

No warranty is made that the coverages and limits listed herein are adequate to cover and protect the interests of the grantee for the grantee's operations. These are solely minimums that have been set to protect the interests of VDOL (the State.)

If the grantee currently has no automobile liability insurance, it can check with its general liability carrier to explore adding the appropriate rider.

Workers' Compensation: With respect to all operations performed, the grantee shall carry workers' compensation insurance policy which is valid in the State of Vermont in accordance with the laws of the State of Vermont.

If you have no employees, you can apply for an exemption through the Vermont Department of Labor's Workers' Compensation Division at www.labor.vermont.gov or 802-828-2286.

7. **Entity must have established personnel policies.** The size of the organization often determines the complexity and number of policies the organization must have. Personnel policies are required in the following areas:
 - Equal Employment Opportunity
 - Harassment
 - Non-discrimination
 - Pay Policy and Pay Periods
 - Grievance Procedures for both employees AND, where applicable, participants
8. Evidence will need to be provided that individual signing grant has signatory authority to sign on behalf of organization.